251305

June 30, 2014

Via Overnight Delivery



2600 Maitland Center Pkwy.

Suite 300

Maitland, FL 32751

P.O. Drawer 200

Winter Park, FL

32790-0200

Tel: 407-740-8575

Fax: 407-740-0613

www.tminc.com

Ms. Jocelyn Boyd South Carolina Public Service Commission 101 Executive Center Dr. Columbia, SC 29210

RE:

Budget PrePay, Inc

SC Copy of FCC Form 481 - Carrier Annual Reporting

Docket No. 2014-14-C (Low Income)

Dear Ms. Boyd:

Enclosed please find a copy of the SC Copy of FCC Form 481 - Carrier Annual Reporting, filed on behalf of Budget PrePay, Inc. No check is enclosed as there are no remittance fees due.

This report has also been emailed to eford@reg.staff.sc.gov.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Craig Neeld

Compliance Reporting Specialist

cc:

Lakisha Taylor - Budget PrePay, Inc

file:

Budget PrePay, Inc - Reporting - South Carolina

CN/jg

#### **Jackie Gilchrist**

From: Jackie Gilchrist [jgilchrist@tminc.com]
Sent: Monday, June 30, 2014 4:09 PM

To: 'eford@regstaff.sc.gov'
Cc: 'cneeld@tminc.com'

Subject: Budget PrePay, Inc. - SC Copy of FCC Form 481 - Carrier Annual Reporting - Low Income for

the month ending July 31, 2014

Attachments: Budget Phone SC 249009 certified.pdf

Importance: High

Dear Sir or Madam:

Attached please find the SC Copy of FCC Form 481 - Carrier Annual Reporting for the month ending July 31, 2014, filed on behalf of Budget PrePay, Inc..

Budget PrePay, Inc. is Low Income.

If you have any questions please contact Craig Neeld at 407-740-8575.

Thank you,

immediately.

Jacquelyn Gilchrist

Sr Associate Specialist jgilchrist@tminc.com (407) 659 -8740 - Direct (407) 740-8575 - Office (407) 740-0613 - Fax

#### PLEASE VISIT OUR NEW WEBSITE AT www.tminc.com

Technologies Management, Inc. 2600 Maitland Center Parkway, Suite 300 Maitland, FL 32751

About TMI - Technologies Management, Inc. ("TMI"), serving the telecom industry since 1986, offers consulting services on regulatory compliance and competitive developments in the telecommunications industry. This electronic message contains information from Technologies Management Inc. which may be confidential or privileged. The information is intended to be for the use of the individual or entity named above. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this information is prohibited. If you have received this electronic transmission in error, please notify us by telephone (407-740-8575)

FCC F	orm 481 - Carrier Annual Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060 C July 2013	1986/CMB Control I	Na. 3060-0819
<010	> Study Area Code	249009				V
<015	> Study Area Name	Budget PrePay, Inc.				
	> Program Year	2015				
	<ul> <li>Contact Name: Person USAC should contact with questions about this data</li> </ul>	Lakisha Taylor				
<035	<ul> <li>Contact Telephone Number: Number of the person identified in data line &lt;030&gt;</li> </ul>	3186715000 ext.				
<039	Contact Email Address: Email of the person identified in data line <030>	lakishat@budgetprepa	ay.com			
ANNU	AL REPORTING FOR ALL CARRIERS				54.313 Completion Required	54,422 Completion Required
<100>	Service Quality Improvement Reporting		(complete attached works	heet)	(check box wher	n complete)
<200>	Outage Reporting (voice)		(complete attached works	heet)		1
<210> <300>		outages to report		Č		
<210×				] ,		
<b>\310</b> >	Detail on Attempts (voice)		İ	[		
				(attach descriptive docu	ment)	
<320>	Unfulfilled Service Requests (broadband)			_ [		1888
<330>	Detail on Attempts (broadband)					
				(attach descriptive doc	iment)	
<400>	Number of Complaints per 1,000 customers (voice)			J		
<410>	Fixed 0.0			ſ		<del></del>
<420>	Mobile 0.0			<u> </u>		
<430> <440>	Number of Complaints per 1,000 customers (broadba	and)			•	San
<450>	Mobile	<del></del>		-		2 X X X X X X
<500>	Service Quality Standards & Consumer Protection Rul	les Compliance	(check to indicate certifica	tion)		1
<510>			(attached descriptive do	cument)		<b>—</b>
<600>	Functionality in Emergency Situations		(check to indicate certificat	tion)		<del></del> _
	249009sc610.pdf			-		
<610>		ĺ	attached descriptive docum	nent)		_ ✓
<700>	Company Price Offerings (voice)		/	Г		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Company Price Offerings (broadband)		(complete attached workshi (complete attached workshi			
	Operating Companies and Affiliates		complete attached workship			✓
	Tribal Land Offerings (Y/N)?		complete attached workshi	_		18818
<1000>	Voice Services Rate Comparability		(check to indicate certificati	ion)	W. M.	11111
<1010>			(attach descriptive docume	nt)		
<1100>	Terrestrial Backhaul (Y/N)?		, check to indicate certificat	<u> </u>		* * * * * *
<1110>				-		111111
<1200>	Terms and Condition for Lifeline Customers		complete attached workshe complete attached workshe	\$ "C	Mark Strategies and S	* 6° 6° 6° 6° 6° 6° 6° 6° 6° 6° 6° 6° 6°
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	Including Rate-of-Return Carriers affiliated with Price					
<2000> <2005>		(4	check to indicate certificatio			
ı	Rate of Return Carriers, Proceed to <u>ROR Additional Do</u>		omplete attached workshee <u>et</u>	et)		11111
<3000> <3005>			heck to indicate certification			11111
		(c	omplete attached workshee	n)		8 4 4 4 3

(1001)	(100) Service Ouality Improvement Reporting	FCC Form 481
Data Col	(LOC) Service grantly improvements and Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
5	Study Area Code	249009
015	Study Area Name	Budget PrePay, Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com
<110>	Has your company received its ETC certification from the FCC?	(yes/no) O O
<111>	If your answer to Line <110> is yes, do you have an existing \$54.202(a) "5 year plan" filed with the FCC?	(yes/no)
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	ompany is a
	Please check these boxes below to confirm that the attached documents(s), on line	Name of Attached Document
	112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	
<113>	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received	
<115>		
4116 4116	How (USF)was used to improve service coverage	
<118		

County Name   Parameter   Pa	Study Ace Code   Study Ace Name	(200) Ser Data Coll	(200) Service Outage R Data Collection Form	(200) Service Outage Reporting (Voice) Data Collection Form	(83)						O PC	FCC Form 481 OMB Control No. 3060- July 2013	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	lo. 3060-0819
Study Act a None	Study feet Name   Study feet	6												
August Factor   Contact Name - Number of person feteralized in data line - Glob - 1441-1540     Contact Name - Person (15KG should contact regarding this data line - Glob - 1441-1540	Total Name   Person USAC should constricgenting this data   10.15	610	Study Area C	ode				249009					i	
Contact Name   Person USAC should contact regarding this data line   GSQp   2184715100 set.	Contact Name   Person USAC should contact regarding this data   Lake than 1840 or	(0.00	Study Area N	ame				Budget PreF	ay, Inc.					
Contact fleightone Number of person identified in data line (3)to   1345/13000 care.   Contact fleightone Number of person identified in data line (3)to   1345/13000 care.   Contact final Address - Furnal Address of person identified in data line (3)to   1341/13000 care.   Contact final Address - Furnal Address of person identified in data line (3)to   1341/13000 care.   Contact final Address - Furnal Address	Contact Telebrone Number - Contact Telebrone N	\$070	Program Year					2015						
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Contact Final Address of person identified in data line COSD)   Labi ahis shoulysez prepay, con   Cutatomers   Cutatomer	Contact Fmail Address of person identified in data line 40390	<035>	Contact Telep	Shone Number	- Number of pe	erson identified	in data line <0		ext.					
Normal Angle Start Outage Start Outage End O	NORS Reference Outage Start Outage End Outag	<039>	Contact Emai	Address - Ema	il Address of p	erson identified	in data line <		dgetprepay.com					
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						Cate	ıme	Customers Affected		Affected (Yes / No)	Description (Check	Study Areas	Service Outage	Preventative
											Adda and	(ON / 631)	vesoiution	Procedures
		-												

Page 3

Page 4

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FCC form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013							(db) (db) (db)	Usage Allowance	Limit Reached (select)											
481 roj No. 3060-0986							<ep></ep>	Usage Allowance	(GB)											
FCC Form 481 OMB Control July 2013							- Cd2>	Broadband Service -	Upload Speed (Mbps)											
							4P	Broadband Service - Download Speed	(Mbps)											
		Inc.				tprepay.com			Total Rate and Fees											
	249009	Budget PrePay,	2015	Lakisha Taylor	3186715000 ext.	lakishat@budgetprepay.com	<	State Regulated	Fees											
				s data	in data line <030>	in data line <030>	4 <b>0</b> -		Residential Rate											ļ
				Contact Name - Person USAC should contact regarding this dat	Contact Telephone Number - Number of person identified in data line <030>	Contact Email Address - Email Address of person identified in data line <030>	45 (45)		Exchange (ILEC)											
Data Collection Form	Study Area Code	Study Area Name	Program Year	Contact Name - Person US	Contact Telephone Numbe	Contact Email Address - En	415.		aleic											
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Page 8

FCC Form 481 DMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	000876	Budget PrePay, Inc.	2015	Lakisha Taylor	3186715000 ext.				
(1100) No Terrestrial Backhaul Reporting Data Collection Form			- 1	- 1	<053> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030>	Please check this box to confirm no terrestrial backhaul <a href="mailto:right">&lt;1120&gt;</a> options exist within the supported area pursuant to § 54.313(G)	Please check this box to confirm the reporting carrier offers  broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)		

FCC Form 481 DMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	249nn9	Budget PrePay, Inc.	2015	Lakisha Taylor	3186715000 ext.	lakishat@budgetprepay.com		Name of Attached Document	freebudgetphone.com							
(1200) Terms and Condition for Lifeline Customers Ufeline  Data Collection Form	COTES Study Area Code				1	לוצמן ומבוחוובת זו חמום ווווב לחצמי	<1210> Terms & Conditions of Voice Telephony Lifeline Plans		<1220> Link to Public Website HTTP £	"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	<1221> Information describing the terms and conditions of any voice	telephony service plans offered to Lifeline subscribers,	<1222> Details on the number of minutes provided as part of the plan,	<1223> Additional charges for toll calls, and rates for each such plan.		

(3000) face of Return Carrier Additional Documentation  For collection form  Out Collection form  Out 2013	Study Area Code Crindy drea Name 249009		Contact Name - Person USAC should contact regarding this data Laki sha Taylor	Contact leiephone Number of person identified in data line <030> 3186715000 ext. Contact Email Address - Email Address of person identified in data line <030>	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CRR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CRR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)[1](i)}	Name of Attached Document Listing Required Information S 43.3 (f(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began	Community Anchor Institutions (47 CFR § 54.313(f)[1](ii))	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report  (Yes/No)  (Yes/No)	Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: (3015) Electronic copy of their annual RUS reports (Operating Report for	Telecommunications Borrowers)  Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	if the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information (Yes/No)	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(If)2), contains Either a copy of their audited financial statement: or (2) a financial penort in a formation or the copy of their audited financial statement:	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	Management letter issued by the independent certified public accountant that performed the company's financial audit.	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a independent certified public accountant; or 2) a financial report in a financial report for Telecommunications	borrowers, Undertying information subjected to a review by an independent certified	public accountant Underlying information subjected to an officer certification.  Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	Attach the worksheet listing required information	Name of Attached Document Listing Required Information
(3000) Jane () Data Collectio	<010> Stuc	1 1	11	<035> Cont	CHECK the bo	(3010) <b>Pro</b> Mile	Pleas (3011) § 54. provic	(3012) Com	(3013) is you (3014) if yes	Please check (3015) Elect	Telec (3016) Docur	(3017) If the repor	(3018) If the	if the confii (3019) Èither	(3020) Docu	(3021) Mana	If the to co conta	(3022) Copy indep	(3023) Under	public (3024) Under (3025) Docur	(3026) Attach	

	tion - Reporting Carrier lection form	FCC Form 481 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<010>	Study Area Code	249009
<015>	Study Area Name	Budget PrePay, Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my respondence in the community of the information recipients; and, to the best of my knowledge, the information	nsibilities include ensuring the accuracy of the annual reporting requirements for universal service support reported on this form and in any attachments is accurate.
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

	ilon - Agent / Carrier lection Form	FCC Form 481
<010>	Study Area Code	249009
<015>	Study Area Name	Budget PrePay, Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	3186715000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) <u>David Donahue</u> also certify that I am an officer of the reporting carrier; my resp agent; and, to the best of my knowledge, the reports and data	is authorized to submit the information reported on behalf of the reporting carrier, consibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized provided to the authorized agent is accurate.
Name of Authorized Agent: David Donahue	
Name of Reporting Carrier: Budget PrePay, Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/26/2014
Printed name of Authorized Officer: David Donahue	
Title or position of Authorized Officer: CFO	
Telephone number of Authorized Officer: 3186715000 ext.	
Study Area Code of Reporting Carrier: 249009	Filing Due Date for this form: 07/01/2014

#### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or L	recipients on behalf of Reporting Carrier
), as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal servic the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the	e support recipients on behalf of the reporting carrier; I have provided information reported herein is accurate.
Name of Reporting Carrier: Budget PrePay, Inc.	
Name of Authorized Agent or Employee of Agent: David Donahue	
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 06/26/2014
rinted name of Authorized Agent or Employee of Agent: David Donahue	
Title or position of Authorized Agent or Employee of Agent CFO	
Felephone number of Authorized Agent or Employee of Agent: 3186715000 ext.	
study Area Code of Reporting Carrier: 249009 Filing Due Date for this form:	07/01/2014



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### Budget PrePay, Inc.

# <u>Line 510 – Compliance with Service Quality Standards and Consumer Protection</u>

Budget PrePay, Inc. ("Budget") hereby certifies that it has reviewed and complies with applicable service quality and consumer protection practices, and that it is in compliance with all applicable state requirements in connection with its provision of wireline (if applicable) and wireless voice services. Among other things, Budget:

- Complies with the service standards promulgated by the State of Arkansas.
- Discloses rates and terms of its voice services to customers.
- Provides current terms and conditions to customers and confirms changes in voice service.
- Separately identifies carrier charges from taxes on billing statements and purchase receipts.
- Provides ready access to customer service.
- Promptly responds to consumer inquiries and complaints received from federal and state government agencies.
- Abides by CPNI rules and other rules for the protection of consumer privacy.
- Makes available maps showing the local calling area on point of sale materials and website.
- Provides specific disclosures in advertising if applicable.
- Provides customers the right to terminate voice service

# <u>Line 610 – Functionality in Emergency Situations</u>

Section 54.202(a)(2) of the Commission's Rules requires that each eligible telecommunications carrier ("ETC") must "[d]emonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations." Section 54.313(a)(6) requires ETCs to certify that they are "able to function in emergency situations as set forth in §54.202(a)(2)" in connection with their provision of voice and broadband services.

Budget PrePay, Inc. d/b/a Budget Phone and d/b/a Budget Mobile has deployed [resells the services of underlying carriers that have deployed] sufficient power generators to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.

Budget PrePay Inc. has geographically located its switching infrastructure. All facilities are equipped with both AC and DC battery backup as well as generators. All critical equipment is also supplied with 2 separate power sources (or primary and redundant power feeds).

Budget PrePay maintains multiple paths to reach our network. This is setup by using multiple IP transit providers for all IP connectivity and an N+1 configuration on all TDM connectivity.

Once the origination traffic reaches the Budget PrePay network all elements are setup with the same N+1 configuration. The configuration allows each element a primary and redundant path to terminate the traffic without service interruption. In the event the main element fails or that

<sup>&</sup>lt;sup>1</sup> 47 C.F.R. § 54.202(a).

<sup>&</sup>lt;sup>2</sup> 47 C.F.R. § 54.313(a)(6).

element reaches maximum capacity Budget has designed the network to advance the traffic to 1 of 3 other elements in the same N+1 configuration that is listed above.

The switching infrastructure will advance to the next termination carrier in route in the event of a failure on any termination carrier's route.